

Attorney's Docket No. F-5235 CIP DIV CIP 2

COMBINED DECLARATION AND POWER OF ATTORNEY
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,
CONTINUATION OR CIP)

FEB 09 2004

I, a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type: (check one applicable item below)

original
 design
 supplemental

RECEIVED

FEB 18 2004

TECHNOLOGY CENTER R3700

NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application do not check next item; check appropriate one of last three items.

national stage of PCT

NOTE: If one of the following 3 items apply then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR CIP.

divisional
 continuation
 continuation-in-part (CIP)

INVENTORSHIP IDENTIFICATION

WARNING: If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

Systems and Methods for Collecting Leukocyte-reduced Blood Components, Including
Plasma that is Free or Virtually Free or Cellular Blood Species

SPECIFICATION IDENTIFICATION

the specification of which: (complete (a), (b) or (c))

(a) is attached hereto.
 (b) was filed on 27 March 2001 as Serial No. 09/818,486
 or Express Mail No., as Serial No. not yet known _____
 and was amended on 8 July 2003, copy attached

NOTE: Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67.

(c) was described and claimed in PCT International Application No. _____ filed on _____ and
 as amended under PCT Article 19 on _____ (if any).

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information known to me to be material to patentability, as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the filing date of this continuation-in-part application

(also check the following item, if desired)

In compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR 1.98.

PRIORITY CLAIM (35 U.S.C. § 119)

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

(d) no such applications have been filed.

(e) such applications have been filed as follows.

NOTE: Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below and make the priority claim.

A. PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
			<input type="checkbox"/> YES <input type="checkbox"/> NO []
			<input type="checkbox"/> YES <input type="checkbox"/> NO []
			<input type="checkbox"/> YES <input type="checkbox"/> NO []
			<input type="checkbox"/> YES <input type="checkbox"/> NO []
			<input type="checkbox"/> YES <input type="checkbox"/> NO []



ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

FEB 09 2004

NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a continuation, divisional, or continuation-in-part, then also complete ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CIP APPLICATION for benefit of the prior U.S. or PCT application(s) under 35 U.S.C. S 120.

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Daniel D. Ryan (29,243)
Joseph A. Kromholz (34,204)
Daniel R. Johnson (46,204)
Patrick J. Fleis (P-55,185)
Michael C. Mayo (38,545)

John M. Manion (38,957)
Laura A. Dable (46,436)
Patricia A. Limbach (50,295)
Bradford R.L. Price (29,101)

(check the following item, if applicable)

Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

DIRECT TELEPHONE CALLS TO:
(Name and telephone number)

BAXTER HEALTHCARE CORPORATION
Bradford R.L. Price, Fenwal Division RLP-30
Route 120 and Wilson Road
Round Lake, Illinois 60073

Bradford R.L. Price
(847) 270 - 2632

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

RECEIVED

FEB 18 2004

TECHNOLOGY CENTER R3700

SIGNATURE(S)

NOTE: Carefully indicate the family (or last) name as it should appear on the filing receipt and all other documents.

Full name of sole or first inventor

DANIEL (GIVEN NAME)	(MIDDLE INITIAL OR NAME)	LYNN FAMILY (OR LAST NAME)
Inventor's signature		
Date	Country of Citizenship	US
Residence	SPRING GROVE, ILLINOIS	
Post Office Address	9107 ALAMONTE DRIVE SPRING GROVE, ILLINOIS 60081 US	

Full name of second joint inventor, if any

PHILLIPE (GIVEN NAME)	(MIDDLE INITIAL OR NAME)	VAN HEEMS FAMILY (OR LAST NAME)
Inventor's signature	Van Heems	
Date	Country of Citizenship	FR
Residence	LACHATRE, FRANCE	
Post Office Address	6, PLACE DE L'ABBAYE F-36400 LACHATRE, FRANCE	

Full name of third joint inventor, if any

TAT (GIVEN NAME)	(MIDDLE INITIAL OR NAME)	MUI FAMILY (OR LAST NAME)
Inventor's signature		
Date	Country of Citizenship	US
Residence	CHICAGO, ILLINOIS	
Post Office Address	1463 VICTORIA CHICAGO, ILLINOIS 60660 US	

Full name of fourth joint inventor, if any

JEAN-CLAUDE (GIVEN NAME)	(MIDDLE INITIAL OR NAME)	BERNES FAMILY (OR LAST NAME)
Inventor's signature	X	
Date	Country of Citizenship	BE
Residence	FAIMES, BELGIUM	
Post Office Address	RUE DE LA VALLEE 8 B4317 FAIMES, BELGIUM	

Full name of fifth joint inventor, if any

ROBERT (GIVEN NAME)	(MIDDLE INITIAL OR NAME)	DE VOS FAMILY (OR LAST NAME)
Inventor's signature	X	
Date	Country of Citizenship	BE
Residence	LILLOIS-WITTERZEE, BELGIUM	
Post Office Address	AV. DU SABOTIER 27 B1428 LILLOIS-WITTERZEE, BELGIUM	

Full name of sixth joint Inventor, if any

JEAN-MARIE (GIVEN NAME)	(MIDDLE INITIAL OR NAME)	MATHIAS FAMILY (OR LAST NAME)
Inventor's signature	X	
Date	Country of Citizenship	BE
Residence	LILLOIS, BELGIUM	
Post Office Address	AVENUE DU TONNELIER, 46 B1428 LILLOIS, BELGIUM	

SIGNATURE(S)

NOTE. Carefully indicate the family (or last) name as it should appear on the filing receipt and all other documents.

Full name of sole or first inventor:

DANIEL

(GIVEN NAME)

Inventor's signature

Date 1/30/04

Residence

Post Office Address

(MIDDLE INITIAL OR NAME)

Country of Citizenship US

SPRING GROVE, ILLINOIS

9107 ALAMONTE DRIVE

SPRING GROVE, ILLINOIS 60081 US

LYNN

FAMILY (OR LAST NAME)

Full name of second joint inventor, if any

PHILLIPPE

(GIVEN NAME)

Inventor's signature

Date

Residence

Post Office Address

(MIDDLE INITIAL OR NAME)

Country of Citizenship FR

LACHATRE, FRANCE

6, PLACE DE L'ABBAYE

F-36400 LACHATRE, FRANCE

VAN HEEMS

FAMILY (OR LAST NAME)

Full name of third joint inventor, if any

TAT

(GIVEN NAME)

Inventor's signature

Date 1/30/04

Residence

Post Office Address

(MIDDLE INITIAL OR NAME)

Country of Citizenship US

CHICAGO, ILLINOIS

1463 VICTORIA

CHICAGO, ILLINOIS 60660 US

MUI

FAMILY (OR LAST NAME)

Full name of fourth joint inventor, if any

JEAN-CLAUDE

(GIVEN NAME)

Inventor's signature

Date

Residence

Post Office Address

(MIDDLE INITIAL OR NAME)

BERNES

FAMILY (OR LAST NAME)

Country of Citizenship BE

FAIMES, BELGIUM

RUE DE LA VALLEE 8

B4317 FAIMES, BELGIUM

5/8/04
JG

Full name of fifth joint inventor, if any

ROBERT

(GIVEN NAME)

Inventor's signature

Date

Residence

Post Office Address

(MIDDLE INITIAL OR NAME)

DEVOS

FAMILY (OR LAST NAME)

Country of Citizenship BE

LILLOIS-WITTERZEE, BELGIUM

AV. DU SABOTIER, 27

B1428 LILLOIS-WITTERZEE, BELGIUM

Full name of sixth joint inventor, if any

JEAN-MARIE

(GIVEN NAME)

Inventor's signature

Date

Residence

Post Office Address

(MIDDLE INITIAL OR NAME)

MATHIAS

FAMILY (OR LAST NAME)

Country of Citizenship BE

LILLOIS, BELGIUM

AVENUE DU TONNELIER, 46

SIGNATURE(S)

NOTE: Carefully indicate the family (or last) name as it should appear on the filing receipt and all other documents

Full name of sole or first inventor:

DANIEL

(GIVEN NAME)

(MIDDLE INITIAL OR NAME)

LYNN

FAMILY (OR LAST NAME)

Inventor's signature

Date 2/2/04 Country of Citizenship US
Residence SPRING GROVE ILLINOIS
Post Office Address 9107 ALAMONTE DRIVE
SPRING GROVE ILLINOIS 60081 US

Full name of second joint inventor, if any

PHILLI IPPF

(GIVEN NAME)

(MIDDLE INITIAL OR NAME)

VAN HEEMS

FAMILY (OR LAST NAME)

Inventor's signature Date 2/2/04 Country of Citizenship FR
Residence LACHATRE, FRANCE
Post Office Address 6 PLACE DE L'ARRAYE
F-36400 LACHATRE, FRANCE

Full name of third joint inventor, if any

TAT

(GIVEN NAME)

(MIDDLE INITIAL OR NAME)

MUI

FAMILY (OR LAST NAME)

Inventor's signature

Date 2/2/04 Country of Citizenship US
Residence CHICAGO, ILLINOIS
Post Office Address 1463 VICTORIA
CHICAGO, ILLINOIS 60660 US

Full name of fourth joint inventor, if any

JEAN-CLAUDE

(GIVEN NAME)

(MIDDLE INITIAL OR NAME)

AFRNFS

FAMILY (OR LAST NAME)

Inventor's signature Date 2/2/04 Country of Citizenship BE
Residence FAIMES, BELGIUM
Post Office Address RUE DE LA VALLEE 8
B-317 FAIMES BELGIUM

Full name of fifth joint inventor, if any

ROBERT

(GIVEN NAME)

(MIDDLE INITIAL OR NAME)

DF VOS

FAMILY (OR LAST NAME)

Inventor's signature Date 2/2/04 Country of Citizenship BE
Residence LILLOIS-WITTERZEE BELGIUM
Post Office Address AV DUL SEROTIER 27
B1428 LILLOIS-WITTERZEE BELGIUM

Full name of sixth joint inventor, if any

JEAN-MARIE

(GIVEN NAME)

(MIDDLE INITIAL OR NAME)

MATHIAS

FAMILY (OR LAST NAME)

Inventor's signature Date 2/2/04 Country of Citizenship BE
Residence LILLOIS BELGIUM
Post Office Address AVENUE DU TONNELIER 26
B1428 LILLOIS BELGIUM

CHECK PROPER BOX FOR ANY OF THE FOLLOWING ADDITIONAL PAGE(S) WHICH
FORM A PART OF THIS DECLARATION

Signature for sixth and subsequent joint inventors.

Signature by administrator(trix), executor(trix) or legal representative for deceased or
incapacitated inventor.

Signature for inventor who refuses to sign or cannot be reached by person authorized under 37
CFR 1.47.

Added page to combined declaration and power of attorney for divisional, continuation, or
continuation-in-part (CIP) application.

Authorization of attorney(s) to accept and follow instructions from representative

*(If no further pages form a part of this declaration then end this declaration with this page
and check the following item:)*

This declaration ends with this page

**ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY
FOR US PRIORITY CLAIM**

CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S) UNDER 35 U.S.C. 120

I hereby claim the benefit under Title 35, United States Code, S 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, S 112, I acknowledge the duty to disclose information that is material to the examination of this application, namely, information where there is substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

**PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS
DESIGNATING THE U.S. FOR BENEFIT UNDER 35 USC 120:**

U.S. APPLICATIONS	U.S. FILING DATE	Status (CHECK ONE)		
		Patented	Pending	Abandoned
1.09/540,935	03/31/2000			
2.60/252,870	11/22/2000			
3.				

PCT APPLICATIONS DESIGNATING THE U.S.

PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NOS. ASSIGNED (if any)
4.		
5.		
6.		

35 USC 119 PRIORITY CLAIM, IF ANY, FOR ABOVE LISTED U.S./PCT APPLICATIONS

**DETAILS OF FOREIGN APPLICATION FROM WHICH PRIORITY APPLICATION
CLAIMED UNDER 35 USC 119**

Country	Application No.	Date of filing (day, month, year)	Date of issue (day, month, year)
1.			
2.			
3.			
4.			
5.			
6.			

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Lynn et al. Docket No. F-5235 CIP DIV CIP 2
Serial No.: 09/818,486 Examiner: T. Bianco
Filed: 27 March 2001 Group Art Unit: 3762
Title: Systems and Methods for Collecting Leukocyte-Reduced Blood Components
Including Plasma that is Free or Virtually Free of Cellular Blood Species

Response to Requirement for Species Election

COPY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This responds to the Requirement for a Species Election mailed January 8, 2003, for which a shortened one month period of response was established.

A five month extension to respond is respectfully requested, up to and including July 8, 2003.

Applicant elects Species I (Figures 9, 14, 15, and 17 to 19).

Applicant respectfully traverses the election requirement, to the extent it does not include the embodiment of the filter shown in Figure 16. This embodiment is generic to all the species, which encompass different forms of blood collection systems. The filter shown in Figure 16 could be used in any one of the systems. Furthermore, the claims are not directed to any particular construction of the filter.

Applicant believes that the following claims read on the elected species: 1, 2, 3, 5, 6, 7, 8, 10, 12, 13, 16, 17, and 18. Claims 1, 2, 5, and 18 are believed to be generic.

Respectfully Submitted,

By



Daniel D. Ryan, Reg. No. 29,243

RYAN KROMHOLZ & MANION, S.C.
Post Office Box 26618
Milwaukee, Wisconsin 53226
(262) 783 - 1300
8 July, 2003
818486 Restriction Requirement

Attachment to Supplemental Declaration